



BUST OF ERNEST E. TYZZER
BY EDWARD G. DEMING, '40

Meeting in Honor of Dr. Ernest E. Tyzzer

At noon on November 8, 1940, some thirty friends of Dr. Ernest E. Tyzzer, George Fabyan Professor of Comparative Pathology and Professor of Tropical Medicine, met for a luncheon at the Harvard Club to celebrate Dr. Tyzzer's many years of fruitful service to Harvard University. In commemoration of the event a small bronze bust of Dr. Tyzzer, executed by Dr. Edward G. Deming, a recent graduate of the Medical School, was presented to Dr. Tyzzer to be placed in the library of his department. The speech of presentation, made by Dr. Cecil K. Drinker, who conducted the ceremonies of the occasion, was followed by a brief review by Dr. C. Sidney Burwell of Dr. Tyzzer's work at Harvard, especially his contributions to the fields of parasitology and tropical medicine. These brief speeches, together with Dr. Tyzzer's in acceptance of the bust, are given below.

Dr. Drinker:

"It is a great pleasure to be able to say these few words, which are an attempt to let you know, Dr. Tyzzer, the place you have made for yourself in the minds and hearts of your close associates in the University.

"During the past twenty-four years it has been my fortune to achieve a certain degree of intimacy with you, an intimacy which had its origin in investigative work undertaken with members of your staff, but which also occasionally has had the benefit of your steady and wise judgment. This association with your laboratory made it possible for me to see personally the beauty, the care, and finality of your own work. It is, I believe, axiomatic with those who know your field that Tyzzer's observations require no checking.

"To our Medical and Public Health School Faculties you have brought the same clarity, the same downright honesty, and the same plain statement of facts which have characterized your scientific work. I have agreed warmly with you in some administrative matters, and disagreed with you hotly in others, but always with increasing respect for your fairness and a growing knowledge of the objectivity with which you have been able to treat our administrative problems. You have been an unflinchingly good influence in both our schools.

"This small bust, which we are presenting to your laboratory, seems to me to suggest much of what you have meant to us, and I now turn it over to you as a token of the appreciation of a group of your friends. Our wish and hope is that you will place it in your departmental library, where it may serve as an enduring reminder not only of your achievement but—perhaps more important still—of your steadfast character."

Dr. Burwell:

"It is my privilege to say a few words to you, Dr. Tyzzer, on behalf of the Faculty of Medicine. You entered the Harvard Medical School in 1898, and the matriculation book of that year shows your signature written firmly in the middle of a page in, I must say, a much more legible handwriting than many medical students of today exhibit. After a careful investigation of your career as a student, I am glad to be able to report to this group that among your other distinctions in the Medical School was an 'A' in Comparative Pathology.

"Part of what should be said here concerns your researches, and these cover a wide and notable field. In the beginning, I

take it, your work concerned problems of a group of diseases associated with filtrable viruses, including foot and mouth disease, vaccinia, variola, and varicella. Dr. Sellards tells me that some of the preparations which you made during that early period of your work were used as illustrative specimens in the recent symposium held here on virus diseases. It is well known that the quality of your work means that your conclusions are as durable as your preparations.

"Our men working on cancer tell me that the extensive observations which you made on the interrelations between heredity and neoplasms, based on your data of about 1907, are the fundamental observations in that very important field. All are familiar with your fruitful investigations of the blackhead of turkeys, which came, I believe, after your appointment as George Fabyan Professor of Comparative Pathology. These investigations indicated that the causative protozoön was an organism quite different from the one supposed to be the etiological factor. These studies were followed by a discovery of far-reaching importance concerning the transmission of this protozoön by a parasitic nematode in fowls.

"Our thoughts about turkeys ought not, in my opinion, to leave out a statement of gratitude to you for the breeding experiments which resulted in the evolution of that luscious bird, the 'Tyzzer turk.' The flavor and texture of your birds were so superlatively excellent that every one preferred a 'Tyzzer turk' to any other variety. This, as might have been expected, resulted in a confusion of the fowl market, with results such as the following. The wife of one of the Professors in the Medical School very wisely got one of Dr. Tyzzer's turkeys for Thanksgiving and Christmas whenever she could. This greatly distressed the butcher who ordinarily supplied her table with meat. One day she needed a turkey and, because Dr. Tyzzer's supply was exhausted, turned to the butcher shop for it. The meat man, wisely seizing his opportunity, produced the best bird he had, and offered it for her judgment, saying

hopefully as he did so that, although Dr. Tyzzer hadn't raised this particular turkey, it was a very unusual one, being in fact a Johns Hopkins bird.

"After the turkeys, your interest returned to the Bartonella group of infections, and I believe your experience in this dates back to the Harvard expedition to Peru, which took place in 1913 or thereabouts. There are many other aspects to your productive research career, which have illuminated not only your own field, but many related fields, such as that of immunology. It is a record of which we are very proud, and in which you should find a durable satisfaction.

"Not only have you contributed very substantially to science by your investigations but you have continued to demonstrate the importance of comparative pathology in medical research and in a medical school, and to emphasize the extensive opportunity for learning about disease by the study of animal pathology.

"Finally, I should like to say a word about another aspect of your value to the Medical School, and that is the wisdom, the helpfulness, and the high standards which you have always brought to considerations of School policy or problems concerning personnel. For all of these things, for your researches, your example, and for your wise and friendly help through many years, we are all permanently grateful to you."

Dr. Tyzzer:

"I have been coached for several days by my friends to confine myself to a few remarks and to make them wholly formal, but when at a wake the deceased starts talking there is no knowing what may come of it.

"Now we have here in this object which Dr. Drinker has just presented me a specimen, and specimens are always acceptable to our department. The next step is to attempt to classify it. Is it *Pithecanthropus erectus*? No. *Sinanthropus pekinensis*? Clearly more advanced than that. *Homo neanderthalensis*? Heavy supra-orbital

ridges, low forehead. Now we are getting a little closer. This image is apparently of bronze, and bronze is a lasting metal. May it not be possible that a millenium or so in the future some student in anthropology will be writing on 'The Occurrence and Persistence to a Late Period of the Neanderthal Type in the Western Hemisphere'? Or if it qualifies as *Homo sapiens*, perhaps it complies more closely with the variety known as *H. sapiens fossilis*.

"The difficulty of the sculptor's task may be readily understood, for if the flattery were too great, the subject might not be recognized, and if the effect were too realistic the result might not be presentable. Dr. Deming is to be congratulated on a very admirable piece of work, and in accepting it for the department I am deeply touched by the sentiments of friendship and esteem which it represents.

"Now as I look around over the present gathering I see a specialist who through the years has looked after my physical welfare; a surgeon who has taken me apart and put me together again—almost as good as new; friends, many of them life-long friends; and two of the finest deans that it would be possible to find. I feel that there can be no greater satisfaction than is derived from the

confidence and friendship expressed by your being here.

"It does not seem to be an occasion for counting coups, for defending one's course, or for suggesting future policies. I realize that I have not developed to any great extent the qualification that is supposed to be essential to professors—that of being a distinguished authority on something or other. But I have at least—and I say it with some satisfaction—maintained my status as a student, and I still continue to learn with enjoyment. In fact, the work that I have engaged in has always seemed like recreation rather than work.

"After a long period of service with the University, one comes more and more to realize the great indebtedness, not only of oneself but of the whole community, to Harvard. We may have some vague conception of the rôle of a university like Harvard as a fountain head of learning, as a repository for information, and as an institution for the encouragement and maintenance of scientific research, but we are scarcely able to envisage the extent of its influence in the lives of a people. It seems then a fitting occasion to propose a toast not only to our own University but to universities in general."

Tratelja Farms

BY JOHN A. P. MILLET, M.D., '14

(Dr. Millet here paints a picture of what may be a future form of established psychotherapy. He is conducting an experiment in intelligent care of certain psychologically handicapped patients.—Ed.)

Tratelja Farms was established in November, 1938, at Diamond Point, Lake George, as a psychotherapeutic and rehabilitation centre for the care of psychosomatic disorders, and for the study and treatment of emotional maladjustments. The primary aim envisaged by myself and my colleague, Dr. Daniel Blain, was to demonstrate the possibility of providing modern methods of medical and psychiatric treatment at a lower cost than is possible in the usual small private sanatoria and psychotherapeutic centres. In addition, a certain philosophy of treatment was also determined upon which might be summarized as an attempt to keep alive in the patient group the sense of social living and of the need for individual contribution to group needs through stressing practical and realistic types of creative occupation. In other words, for the concept of occupational therapy we are attempting to introduce the concept of therapeutic creative occupation.

Tratelja Farms is a property consisting of 850 acres in which are included two separate farms, one of which was already in operation at the time when the undertaking was launched, the other having stood untenanted for about ten years, though excellently equipped. In addition to these two farms, both of which are now in use as residences for patients, there is a large Manor house where patients in the higher income brackets can be accommodated, and three cottages, two of which have been constructed since the date of our first occupancy. These buildings afford space for about 24 patients in winter, with an added summer complement of 10 in the two that have no central heating system.

Aside from the area occupied by the two farms and the other buildings, the property consists in the main of woodland and stream. There is also a large trout pond in a clearing near the Manor House. During the summer the patients have had access to the lake through the private beach attached to the summer staff cottage.

The resident medical and psychiatric care is under the direction of Dr. Josef A. Kindwall, who was formerly connected with the Westchester Division of the New York Hospital, until recently known as the Bloomingdale Hospital, and later organized the Psychiatric Division of the Clifton Springs Sanitarium. He is assisted in the diagnosis and treatment of medical and surgical complications by Dr. Edwin B. Jenks, an able practitioner in the neighborhood, and in the psychological work by Dr. Erich Kraft.

In addition to the above physicians the staff includes two psychiatric, and one general nurse, a trained occupational therapist, and an instructor in wood-working and cabinet-making. Patients are accepted on one of two bases, either as residents of the Manor House and cottages, in which a complete domestic staff is employed, or as guests at one of the farm-houses, where it is understood that, in return for paying a less than maintenance rate, they will contribute by their own voluntary efforts to the running of the house or to the outdoor work on the farm. There is not always a nurse in residence at the farms, as for many weeks together the group will be so constituted as to make this unnecessary. Each farm is under the direction of a working hostess-housekeeper, who organizes the team work among the group and is responsible for preparing the meals. The result is that in these farm units the atmosphere is less formal than at the Manor House, and resembles that of a family on vacation with some visiting relatives sharing in the chores.

While the rate paid by the individual guest determines necessarily to some extent the nature of the quarters assigned, the Medical Director reserves the privilege of placing the patient in the environment best suited to his particular needs. In some instances a well-to-do patient specifically requests transfer to one of the farm houses, whereas in other cases the medical or psychological status may necessitate a change from farm house to cottage or Manor house, in the interest of providing closer supervision or a more acceptable social grouping. By and large, therefore, there is no possibility of complaint on the ground of social discrimination, so that the atmosphere in all three main houses is obviously democratic, and as a result soon brings into clear relief the personality problems that call for particular attention.

As may be expected, there has been a considerable demand for treatment by patients of very limited financial resources. We have done our utmost not to refuse our help to anyone who has applied, provided we feel that our particular equipment in personnel and occupational resources might succeed in solving their problems, and that the patient had a sympathetic attitude towards the ideal of co-operative effort. The need for expanding space has grown so rapidly and the cost of major capital installations become so considerable that we have had to revise this policy to some degree, and to refuse to accept any patient who cannot pay a minimum of \$30. per week on the co-operative plan, or \$80. per week at the Manor House. The maximum rate on the co-operative plan is \$75. per week, the maximum rate at the Manor House, in a room with private bath, being \$150. per week. This rate includes all resident medical, psychotherapeutic, nursing, and occupational direction. The problems of the entire patient group are discussed at weekly staff conferences, where one or both of the consulting psychiatrists are present.

Upon admission the patient is seen by the Resident Medical Director. On the following day he is given a physical and neurologi-

cal examination, and his programme of activities provisionally mapped out. The number of professional interviews is then determined upon in accordance with the needs of the individual, and his occupational assignments arranged. In the latter field there is a wide range of choice, possibilities including various sorts of outdoor occupation, such as truck-gardening, horticulture, construction work, trail blazing, wood-cutting, or road work. In addition to these there are the usual types of indoor occupation, such as wood-working, weaving, sewing, upholstery work, et cetera. It is the definite aim of those in charge of the occupational programme to create a sense of satisfaction in the technique of work for work's sake, and in the relationship of the effort expended to the manifest utility of the product. Everyone is given the sense that he is building for practical needs, rather than going through the form of some manual activity just to keep his mind off his troubles. The deeply inherent love in mankind for the simpler and more basic contacts with the soil and its products, and the universal instinct for creating and beautifying a home give these occupational activities a particular value in the therapeutic programme. If a patient fails to grasp or to have a feeling for this community value, it has often been found possible to develop it through assigning him some work which would have a more personal significance. In one case where a middle-aged man suffering from a depression, with obsessive feelings of self-reproach on the score of not having given his wife a square deal, first began to mend when he was encouraged to build a small card-table for his wife. Never having handled a tool before he became an expert craftsman and soon regained some self-respect.

In connection with these attempts to work out the principle of co-operative creative occupation, we have in certain instances given part-time employment to patients without financial resources, an experiment which has proved to have definite drawbacks, though in two instances the result has

proved therapeutically justified. One patient who has proved too emotionally unstable to stand the strain of a highly competitive business life and to weather the storm of carrying great responsibilities, asked for the opportunity of going back to his first love, the conduct of a farm. This man is now running the first farm that we put into active operation. Though the project is not yet fully stabilized he has done a magnificent job in caring for a small herd of blooded Ayrshire cows, has raised 400 brooderchicks to maturity as broilers and laying pullets, with a mortality of approximately one percent, and has raised a considerable part of the garden produce needed for summer consumption. Plans are now under consideration for establishing another project for raising sheep and milking goats on the second farm. It is our eventual aim to create a therapeutic centre where every basic food material excepting certain meats and staples, will be produced, stored, processed, and distributed within the geographical confines of the property, and so reduce the cost per capita to a point where the ideal of low cost therapy can become an accomplished fact without imperiling the financial stability of the organization.

Tratelja Farms, though organized theoretically as a corporation for the purpose of making a profit does not aim to become commercially successful. Its directors believe, however, that through the proper development and utilization of the natural resources of the property, the cost of operations can be brought down to a point where there will be no deficit, and where an increasing number of patients in the less privileged income groups can be given first class treatment. Such a demonstration is necessary if the plan is to prove its value, and to become a model for similarly conceived units in other parts of the country.

The distribution of patients in the various income groups, as exemplified by rates charged for their care at Tratelja had been quite even until the facilities of the farms themselves had been made available. From

that time on there has been, as was to be expected, a considerable preponderance of patients accepted on the co-operative plan. We hope to balance this trend by constructing an addition to the Manor House during the coming year where more accommodations will be available for patients in the less economically handicapped group.

During the two years of its existence Tratelja has cared for six patients who have paid nothing for their support or medical supervision. The likelihood that there might be an increasing call to meet similar appeals determined us to create a Foundation whose trustees would be sympathetically interested in the work. In March 1940 the Lake George Foundation was granted a charter by New York State after the properties and operations of Tratelja Farms had been subjected to detailed inspection by the State Board of Social Welfare and the Department of Mental Hygiene. This Foundation has been of material help in providing many of the physical improvements needed to enable Tratelja Farms to carry on its work.

Under the auspices of this Foundation the staff of Tratelja Farms has opened a Child Guidance and Mental Hygiene Clinic in the City of Glens Falls, to serve the needs of Warren County and of those counties geographically contiguous to it. The decrease in appropriations for the operation of the State Department of Mental Hygiene had forced the Commissioner to reduce the number of clinics held in this region from one each month to one in two months, so that there was a very inadequate provision for prophylaxis, treatment, or follow-up of psychopathic cases in the community. Judge Paul Boyce of the local Children's Court sought us out at Tratelja to ask whether we might be able to lend him a hand with some of his problem cases which were not severe enough to send to an institution, penal or otherwise, nor mild enough to keep in their own environment without the help of some psychiatric adviser. This sincere and urgent appeal was the stimulus which led to the formation of

these clinics, which are now being freely used by the physicians of the community and various social agencies.

There are still two parts of the original plan which have not as yet been developed. These are, first, the establishment of a summer school of family relations, and, secondly, the opening of a boarding school for children whose life situation or personality problems call for special individual handling in a normal group setting. These two projects in their conception are naturally inter-related. The plan for the summer school includes the establishment of families in summer cottages during the vacation period, so that the family as a whole could be observed in operation, rather than some individual member whose problem seemed to be the most pressing feature. Incorporated in the plan would be forum discussions for parents and lectures by men and women distinguished in the fields of Child Psychology and Human Relationships, as well as individual conferences with the various members of each family unit. During the two years of our corporate existence we have solved the problems of one such family and been of material assistance to another. We have had the chance to serve three other families to some extent. The need is only too apparent. Unfortunately, our resources of time and money and personnel are at present too fully taken up with consolidating our present developments to permit for the present any active plans for putting this project into operation. From such a source as this summer school would provide there should be plenty of material for starting a school of a most unusual and interesting type. The varied possibilities provided by the natural resources of the property and the many productive activities incidental to its further development would give the children a far richer and more varied experience than is available in the average boarding school.

Another therapeutic instrument which we hope to utilize in the future is the broad field of the Arts. There have been several accomplished musicians among the patient

group, and one or two fairly good artists, but as yet we have found no opportunity to develop a gifted teacher who could help stimulate these interests which so often lie latent or undeveloped in the psychic storehouse of maladjusted and neurotic individuals. The liberating influence of self-expression through painting, sculpture, music, and drama has been so abundantly demonstrated in other therapeutic settings that our whole picture will remain incomplete until this lack has been eliminated.

Let us turn for a moment, however, from the projects that still remain as castles in the air to those that have actually been put into operation or completed by the labor of the staff and resident patients. They include the ploughing, planting, and running of a farm, the delivery of dairy products, eggs, and broilers to the kitchen, as well as the construction of adequate shelters for pigs and chickens, re-roofing of one of the farm-houses, cutting of numerous trails through the woods, reconstruction of a small concrete dam to bring up the level of the trout pond, repairs to the roads, remodelling of a former garage and stable into suitable quarters for a wood-working and craft shop, various jobs in curtain making and upholstery, the building of two row-boats, with demountable masts, and, last, but not least, the construction of some very beautiful pine furniture for the second farm house. These not inconsiderable accomplishments, all effected without the help of hired labor, make it seem possible that these castles in the air may yet turn out to be Realities on the Lake. The natural beauty of Lake George and the magnificent site of the Tratelja Manor House are in themselves of no small importance as a backdrop for the elaboration of these various activities, for to work and relax in beautiful surroundings makes an almost unbeatable combination.

"Tratelja" was the name given the property by Dr. C. J. Nordstrom, a Swedish physician, who was the builder of the Manor House and who operated the farms for some years prior to his wife's death. The word

is an old Swedish word meaning 'wood-cutter,' and was apparently chosen by him as a record of his own activities in felling the timber to clear the road and build his home. Tratelja was the name also of a mythical Swedish king who was supposed to have been the first to hew down the forests and clear the land for cultivation. The trees he used for building his Viking ships. So, we thought the name well suited to what we felt to be a pioneering venture.

Tratelja Farms has a strange fascination for staff and patients alike. The life is so many-sided that everyone senses a certain vitality about it. The problems of organization and development challenge the imagination and efforts of everyone. We claim no originality of conception except as to the idea that if the development proceeds according to plan, we may show the way to providing first class medical and psychiatric care to private patients at a more reasonable rate than has hitherto been achieved, in an atmosphere and surroundings which combine the minimum of formality with the

maximum of beauty. We have borrowed the co-operative idea from the Gould Farm, certain concepts of domestic economy from Ralph Borsodi, the agricultural ideal from our convictions as to the importance of simple manual activities of a productive sort in relieving the load of an anxiety-ridden mind, and in building up the latent physical resources of an indolent or white-collar-man physique. We try to make our schedules individual in the highest possible degree and, though three of the four psychotherapists are psychoanalytically trained, we rarely use the psychoanalytical method of treatment. Our psychotherapeutic approach is designed to meet the needs of the individual patient rather than to conform to any one system of ideas. We would like to combine something of the insight of Freud, the craftsmanship of Austen Riggs and the freer vision of those who face a changing civilization with the determination to adapt to whatever lies ahead, and to keep their conceptual hypotheses free from prejudice.

A Notable Memento of Oliver Wendell Holmes

At the meeting of the Faculty of Medicine on October 4th, 1940, Dr. Frederic T. Lewis announced that Mrs. Richard Rule, of Washington, D. C., great granddaughter of Anne Holmes, sister of Oliver Wendell Holmes, had given to the Department of Anatomy a silver cup of exceptional value. The capacious chalice was exhibited to the Faculty, and placed in the hands of President Conant.

Referring to this cup, Dr. Holmes has recorded that on his 80th birthday, the 29th of August, 1889, he received "a very beautiful loving cup . . . the most costly and notable of all the many tributes." It is inscribed with what will be recognized as a quotation from his poem "A Sentiment," written in 1848, when he was Dean of the Medical School:—

"The pledge of Friendship!
'T is the heart's current lends the cup its glow
Whate'er the fountain whence the draught may flow."

And underneath the base are engraved the following names:—

Helen C. Bell	Elizabeth Howes
Marianne Brimmer	Sarah O. Jewett
Susan Cabot	Mary G. Lodge
Annie Fields	Minnie C. Pratt
Alice G. Howe	Cora L. Shaw
Sarah W. Whitman	

Dr. Holmes questioned whether a man "who in his younger days has written poetry, or what passed for it, should continue to attempt it in his later years" when the mind "has lost its flexibility." Yet he re-

plied in verse. In "Over the Teacups" he first reflects that it is the nature of poetry to writhe itself along, entangled in the vocabulary.

"When you write in prose you say what you
mean.

When you write in rhyme you say what you
must."

"Should I send this poem to the publishers?

Some said, 'John, print it'; others said, 'Not so'."

But there are eight stanzas "To the Eleven Ladies." First, with delicate evasion, he expresses the fact that the cup must be turned bottom side up to read the names.

"Not till the bowl is emptied shalt thou know
The names enrolled below."

As to the number—eleven ladies—

"Count thou their number on the beads of
Heaven,—

Alas! the clustered Pleiads are but seven;
Nay, the nine sister Muses are too few,—
The Graces must add two."

And he concludes:—

"Better love's perfume in the empty bowl
Than wine's nepenthe for the aching soul;
Sweeter than song that ever poet sung,
It makes an old heart young!"

Truly, a remarkable gift for a professor of anatomy!

FREDERIC T. LEWIS, '01.

[The cup may be seen at any time, with a selection of Dr. Holmes's books and microscopes, in the Histology Corridor of the Anatomy Building, near the entrance to the amphitheatre.]

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TREASURER'S APPEAL

At this time each year the Harvard Medical Alumni Association makes its annual appeal to its members for financial support. *The Association is supported entirely by the voluntary contributions of its members.* There are no membership dues and the BULLETIN is sent to all living graduates of the Harvard Medical School without charge.

The activities of the Association are growing steadily under the direction of the Council and the facilities of the Alumni Office at the Harvard Medical School are being expanded and developed to make them more available and more useful to the alumni.

Last year 16.1 per cent of our members contributed to the support of the Alumni Association. These 487 men gave a total of \$2,691.87. It is to be hoped that a larger number of members will find that they can contribute this year.

MARSHALL K. BARTLETT, *Treasurer*

MEDICAL SCHOOL NOTES

There is standing room only in the Medical School Library many of these afternoons. A sudden increase of 42% use of the library in the last three years is puzzling the librarians, as there seems to be no very clear reason for it. There have been no increased reading requirements in the various courses. It may be partly the result of the faithful, accumulated work which has been put into the library for so many years. Physically the library has been made more attractive by new lighting fixtures and by replacement of chairs (chairs, incidentally which are not only meant to, but also do slide under the tables to give more room in the aisles). It has always been a place where books and journals can be obtained with a minimum of trouble. There have been many gifts of books, few of money. Off hand, that would seem a fairly desirable state of affairs for a library, but needs at present are primarily for funds to increase the staff. The number of workers is said to be distinctly limited for a library doing such extensive service.

Here is a sign of health in a library: through the Inter-library Loan Service in 1937-1938, there were 260 volumes loaned to or borrowed from 47 libraries; in 1939-1940 there were 896 volumes loaned to or borrowed from 77 libraries. Moreover, our library *borrowed* considerably more volumes than it *loaned*, which shows, we think, that it deals with an active, working group of readers.

There are three student attendants in the library on week-ends. Exhibits continue to attract the eye in the hall outside the library. (You may notice that the cabinets which hold these exhibits have tablets which say that they were presented to the library by the Harvard Medical Alumni Association). The current exhibit pertains to the 100th Anniversary of the Harvard Alumni Association, and illustrates happenings in the School 100 years ago.

The library has acquired a copy of "A Dissertation on the Puerperal Fever", by Peter de Sales la Terriere, 1789, printed

in Boston. This perhaps would not be remarkable except that Peter de Sales la Terriere, a Canadian, received the first medical diploma (Bachelor in Medicine) which Harvard College ever issued. Reginald Fitz is making a study of this first recipient of a Harvard medical degree and of his dissertation.

During these perilous times the Bulletin's well-meaning reporter has a kind of urge to write about the library and other more peaceful things, but a discussion of happenings is not complete without making note of progress in defense medicine. Organization of the three base hospitals has been proceeding: Base Hospital No. 5, (Harvard Medical School), No. 6 (Massachusetts General Hospital), and No. 7 (Boston City Hospital). Dr. John E. Gordon is now in England. Various members of the staff of the Harvard Public Health Unit will soon follow him. There is considerable zeal and sacrifice shown by members of the Medical School teaching and research staff for contributing to the general health and safety in the present crisis. Almost every organized research program is either frankly headed for defense problems or is being given some twist in that direction. The work of the School of Public Health is much in the defense field. The Harvard Fatigue Laboratory is engaged in some of the subjects thought worthy of investigation by certain of the defense committees of the National Research Council. How the Medical School has become engaged in the preparedness work has been discussed in the annual report of Dean Burwell, as follows:

"As the defense program of the United States developed, a considerable number of members of the staff of the Medical School began to participate in it either as consultants to various Government departments or as research workers on problems relating to defense. Some of these problems have been pursued in laboratories and camps away from the Medical School.

"Others have been transportable to the

laboratories of the Medical School where, in many departments, existing facilities and existing research teams have permitted advantageous study of problems with important implications for the defense of this country.

"Appropriate committees of the Medical School have, of course, been actively concerned with the problems of the training of students admitted and possible modification in the details of the curriculum and in the duration of the course. All of these matters are under active discussion between the Faculty of the Medical School and those actively concerned with the planning and carrying out of the defense program."

To return to more routine activities of the Medical School—and we are assured that these will not be permitted to lapse—a field of growing influence is the care of student health under Dr. Eugene Eppinger. This is now in its fifth year of work in conjunction with the Department of Hygiene of the University. It has grown so that the students are now making as many as 400 visits a month. The offices are attractive, well-equipped and the services are adequate. A full-time secretary-technician is employed. Here a student not only may but does come to discuss the sarcoma which has suddenly afflicted him as he was listening to a lecture in pathology. Tragically, the student does have serious disease sometimes, and here he can get serious consideration of any questionable condition. An ambitious program incorporating tuberculosis testing, X-rays of the chest, Schick test, Dick test and vaccination is carried out. This is done thoroughly and properly so that the student may be instructed satisfactorily while he receives the benefit of these tests. If we could give to the student innocuously the disease he is to study it would be grand teaching; yet the best care should be given to the medical student when he is sick and thereby he will have the best sort of teaching. There is something of this philosophy in Dr. Eppinger's department.

BOOK REVIEWS

THE ENDOCRINE FUNCTION OF IODINE
by William T. Salter. 351 pages. Cambridge:
Harvard University Press, 1940. Price \$3.50.

Since 1895, when iodine was recognized as a primary constituent of the thyroid gland, remarkable progress has been made with the use of iodine in the treatment of clinical disorders involving the thyroid gland. Experimental studies of the metabolism of iodine have developed at a rapid pace, giving rise to a lack of unanimity of opinion concerning the data derived from such investigations. In a clear and a concise manner, Dr. Salter has correlated established clinical conceptions with confirmed experimental studies. His book is considered most timely.

Following an introductory chapter of historical and of general interest, the author deals with the occurrence of iodine and the biological significance of this element. The amount and nature of iodine in the blood are discussed in detail and many suggestions for fruitful research are offered. Dr. Salter emphasizes a point which is usually overlooked, namely, that quantitative values of amounts of iodine such as are present in the blood cannot be considered as absolute, but only relative within the limitations of the experimental methods of study. The chapter devoted to the constituents of the thyroid gland is excellent. This is attributable to the fact that in this particular field of study the author himself has made many outstanding contributions. Endocrine and neurologic influences on iodine metabolism and thyroid function receive their share of discussion. The chapter concerning iodine balance summarizes our meager knowledge on this subject and points out appropriate fields of endeavor for students who are interested in bio-chemical research. The more recent chemical and biological studies of radioactive iodine comprise a most informative chapter. The application of experimental findings to improved methods of treatment in patients with thyroid disorders forms the concluding chapter to this comprehensive book.

The appendix and bibliography serve a useful purpose for those interested in problems of the metabolism of iodine.

The manner of writing by Dr. Salter contributes to easy reading. The addition of the author's interpretation to the correlated data of other investigators makes unique this volume on iodine metabolism. The book is highly recommended to those interested in clinical problems related to the metabolism of iodine and the thyroid gland; to research students in this field of study, the book is considered essential reading.

HAROLD J. PERKIN, M.A. (Toronto).

Lahey Clinic, Boston, Massachusetts

PUBLIC HEALTH ADMINISTRATION IN THE UNITED STATES by Wilson G. Smillie, M.D., Dr.P.H. Cloth, 553 pp. with 9 illustrations. New York: Macmillan Company 1940. Price \$3.75.

In the five years since the appearance of the original edition, this book has become a standard authority in the field of public health administration, a volume that should be found on the desk of every health officer. Although the new edition follows the original pattern closely, much of it has been completely rewritten and new chapters inserted. Particularly notable is one on the National Health Program, containing a description of the rapid expansion made possible through the Social Security Act. The entire volume has been expanded about 20 per cent.

After an introductory historical section, the book is divided into three parts. The first of these considers the control of communicable diseases. Here Dr. Smillie has admirably resisted the temptation to include too much detail about too many diseases. He has selected a few of major importance to health departments and discussed the control of these as examples of the administrative approach. This section is not intended as a reference volume but as a guide to the administrative application of the details that may be learned from other books.

The succeeding two sections consider the public health program from different points of view, functional and organizational. In the former, the component parts of the program are considered under eleven headings. Although the usual subdivisions are followed quite closely, it is refreshing to note the attention given to nutrition and to the treatment of the child hygiene program as a whole rather than divided into artificial age zones.

The organizational section discusses the modern health program from the standpoint of the part played by the various participating agencies. In this, as in other parts of the book, Dr. Smillie has distinguished between those activities which he believes to be the responsibility of government and those that properly belong to the private practice of medicine. Although he makes no compromise with the philosophy of ultimate public responsibility for the welfare of the people, he stresses the important rôle that must be played by the private practitioner. In his handling of this controversial subject, he will please neither those who envision extreme socialization of medicine nor those who view all public services as encroachments upon private initiative. As Dr. Smillie represents a middle course, he will draw fire from both flanks.

The appendix contains the recommendations of the American Public Health Association and the Conference of Mayors as to minimum qualifications for personnel engaged in public health

work. This strengthens the plea that is made throughout the volume for the employment of trained professional personnel.

The plan of the last two sections means that there is inevitably a certain amount of repetition. While some may criticize the extent of this, the reviewer finds it an element of strength rather than of weakness. Too many public health programs have suffered from a confused mixture of functional and organizational thinking. The repetition should clarify the thinking of the reader and add emphasis to the points that Dr. Smillie wishes to bring out.

Many readers of the original volume have felt that the author was often too dogmatic in his assertions and in the disposal of controversial matters. They will find no change in the revised edition. Where differences of opinion exist, Dr. Smillie indicates the opposing viewpoints but does not hesitate to express his own ideas and conclusions. If this is dogmatism, the reviewer feels that more dogmatism is needed in books of this character. It is stimulating to find an author who will express his convictions so fearlessly. Such expressions do not imply a closed mind but rather a realization that the health officer cannot await the end of controversy before taking a definite administrative stand. The reviewer finds himself in remarkable agreement with most, but not all, of Dr. Smillie's views, though he regrets that in many places brevity forced a curtailment of some of the arguments. Maybe in the next revision (and the book is of such value that it will live through many revisions as the public health scene changes), Dr. Smillie will amplify these points.

GAYLORD W. ANDERSON, '28.

Editorial Reflections on the Completion of N.S. Vol. X, *Collected Papers*, Department of Diseases of the Nervous System, Harvard Medical School. (*Excerpts*).

The completion of the tenth volume of the New Series of *Collected Papers* would seem to be an appropriate time to review the last ten volumes published since 1931. The late Dr. Edward W. Taylor set the standard of the volumes, which has remained unchanged.

The *Collected Papers* represent the work done in the entire Department of Diseases of the Nervous System, Harvard Medical School, from 1930 to 1939. The Department consisted in 1939 of the James Jackson Putnam Professor of Neurology, the Professor of Psychiatry, and the Bullard Professor of Neuropathology. In addition there were 6 clinical associate or assistant professors and 62 associates, instructors, assistants, research associates and research fellows. This list should be compared with the Department in 1930. At that time the Department was headed by a Professor of Psychiatry, the

Bullard Professor of Neuropathology, and the James Jackson Putnam Clinical Professor of Neurology. There were three assistant professors and 27 instructors, assistants, research associates and research fellows. In a period of ten years, therefore, the faculty of the Department grew from 33 to 71, although the number of students attending the Harvard Medical School was not increased during this period. The rapid growth of the faculty, however, depends not only on the number of students but also upon other factors. In 1939 over one-third of the members of the faculty were doing work in research and were not, except in a minor way, connected with the teaching of students. There was, moreover, during this period, a distinct increase in interest in neurology and psychiatry on the part of the fourth-year students, who have a choice of elective subjects during their final year in the Medical School. Many more men elected Diseases of the Nervous System than in any previous period of the existence of the Department. The classes, moreover, were made smaller and practically all didactic teaching was eliminated. Lectures to the second and third-year students were presented in the form of clinics, without a formal discourse on the subject at hand. The bulk of the teaching was done in small groups of four to six students, either in the out-patient departments or at the bedside. It is not surprising, therefore, to note the increase in the size of the faculty during the ten years from 1930 to 1939 inclusive.

The number of reprints collected each year has increased and a larger percentage of the total output of the Department is bound together each year. There has been an unfortunate tendency to publish too many papers, often of a premature type. The impetus appears to come from the research laboratories, where the number of papers, and not their length or even their worth, is stressed in securing funds for further investigative work. This, indeed, is unfortunate, not only for the individual who must collect the papers for these volumes, but also for the bibliographer whose duty it is to record the multiple publications in the indexes of medical literature. There has been a tendency, moreover, to rush into print in order to make a large numerical showing from any one division of the whole group. As one looks over the ten-year period, there is a feeling that the quality of the papers has not been entirely maintained and that the rush for publication has taken something away from the considered reports of previous years. One notes with pleasure, however, the return to pathological studies, always a fundamental and satisfying type of research in an era when speculation is likely to be rife.

There are the reports of clinical research, as distinct from laboratory research. Although clinical research is not supported by the great

Foundations, much of value should be expected from the clinical observer applying the knowledge gained from the laboratory at the bedside. Funds for clinical research probably will have to be raised by other methods and it is notable that in recent years there has grown up an excellent co-operative spirit between the clinician and the pharmaceutical house making the drug under investigation. It is no longer considered unethical to deal with chemical firms making drugs and even to obtain research funds from them.

Finally, there is an indication that this large Department of Nervous and Mental Diseases in the Harvard Medical School can no longer be considered as a department devoted to a specialty. It is taking its place rapidly with the other major divisions of medical teaching, such as medicine, surgery, pediatrics and obstetrics. There is a possibility, as always, that the pendulum may swing too far and that a single department, stimulated by active workers, may grow beyond the limits ordinarily set for it by a medical school. Nevertheless, as long as the work is good and the type of men doing it are of a superior class, one should not attempt to curtail specialism in medicine. Advances can only be made through specialism in medicine today and it is notable that those medical schools which have practically abolished departments of neurology are far behind in advancing the subject as the years go by.

The Department may look back upon the last ten years' work with considerable satisfaction, for no clinical department in the Harvard Medical School has done more to advance research and investigation than the group of workers whose collected papers form the last ten volumes of this series.

HENRY R. VIETS, '16.

CHARLES WILDER PROFESSOR

Dr. John Everett Gordon, Director of the Harvard Public Health Unit and the Red Cross-Harvard University Hospital in England, has been appointed Charles Wilder Professor of Preventive Medicine and Epidemiology. The post is not restricted to men in one field of medicine. It was last held by the late Hans Zinsser, who was Charles Wilder Professor of Bacteriology and Immunology.

Dr. Gordon was appointed to the Faculty of the Medical School in 1938 as Professor of Preventive Medicine and Epidemiology. He had been Field Director of the International Health Division of the Rockefeller Foundation and Medical Director of the Division of Communicable Diseases at Herman Kiefer Hospital, Detroit.

NECROLOGY

1873

FRANCIS EDWARD PORTER died at Auburndale, Mass., October 11, 1940.

1882

ROSCOE WESLEY SWAN died at Holden, Mass., October 13, 1940.

1884

JOHN TEMPLETON BOWEN died at Boston, Mass., December 3, 1940.

HENRY JACKSON died at Boston, Mass., October 4, 1940.

1885

RICHARD DELANEY died at Boston, Mass., December 4, 1940.

1890

FRANCIS EDWARD CARROLL died at Saugus, Mass., September 18, 1940.

HENRY RUSSELL HITCHCOCK died at Plymouth, Mass., November 23, 1940.

1893

PHILIP KING BROWN died at San Francisco, Calif., October 28, 1940.

1895

ERNEST AMORY CODMAN died at Ponkapoag, Mass., November 23, 1940.

1898

WILLIAM WIRT HARVEY died at Boston, Mass., November 11, 1940.

1899

WILLIAM AVERY GAYLORD died at Pawtucket, R. I., May 22, 1940.

1900-02

JOSEPH FOXE COSTA died at Rio de Janeiro, Brazil, recently.

1903

GEORGE JACKSON HILL died at Boston, Mass., October 29, 1940.

EDWARD MELLUS died at Newton, Mass., December 9, 1940.

1904

FRED ELLSWORTH CLOW died at Wolfboro, N. H., January 4, 1941.

1904-08

FRANCIS JOSEPH FITZPATRICK died at Somerville, Mass., January 2, 1941.

1905

FREDERICK FRANCIS ANDREWS died at Revere, Mass., November 7, 1940.

